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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/770,294	02/02/2004	Andrew D. Miller	YOUZ 2 00059-2	1414

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EXAMINER

FORD, VANESSA L

ART UNIT	PAPER NUMBER
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1645

DATE MAILED: 12/01/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

# Office Action Summary

Application No.

10/770,294

Applicant(s)

MILLER ET AL.

Examiner

Vanessa L. Ford

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-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

## Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

## Status

- 1) ☒ Responsive to communication(s) filed on 9/6/2005.
- 2a) ☒ This action is **FINAL**. 2b) ☐ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

## Disposition of Claims

- 4) ☒ Claim(s) 23-70 is/are pending in the application.
- 4a) Of the above claim(s) \_\_\_\_\_ is/are withdrawn from consideration.
- 5) ☐ Claim(s) \_\_\_\_\_ is/are allowed.
- 6) ☒ Claim(s) 23-70 is/are rejected.
- 7) ☐ Claim(s) \_\_\_\_\_ is/are objected to.
- 8) ☐ Claim(s) \_\_\_\_\_ are subject to restriction and/or election requirement.

## Application Papers

- 9) ☒ The specification is objected to by the Examiner.
- 10) ☒ The drawing(s) filed on 04 February 2004 is/are: a) ☒ accepted or b) ☐ objected to by the Examiner.
- Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
- Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

## Priority under 35 U.S.C. § 119

- 12) ☒ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☒ All b) ☐ Some \* c) ☐ None of:
- ☐ Certified copies of the priority documents have been received.
  - ☒ Certified copies of the priority documents have been received in Application No. 09/194,267.
  - ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

\* See the attached detailed Office action for a list of the certified copies not received.

## Attachment(s)

- 1) ☐ Notice of References Cited (PTO-892)
- 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
- 3) ☐ Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08)  
Paper No(s)/Mail Date \_\_\_\_\_
- 4) ☐ Interview Summary (PTO-413)  
Paper No(s)/Mail Date. \_\_\_\_\_
- 5) ☐ Notice of Informal Patent Application (PTO-152)
- 6) ☐ Other: \_\_\_\_\_

**FINAL ACTION**

1. This Office Action is responsive to Applicant's amendments and responses filed September 6, 2005. Claims 1-22 have been cancelled. Claims 33-36, 54 and 67-68 have been amended. It should be noted that priority documents were received in Applicant No: 09/194, 267, now issued U.S. Patent No.6,756,054.
2. The text of those sections of Title 35, U.S. Code not included in this action can be found in the prior Office Action.

***Objection/Rejection Withdrawn***

3. In view of Applicant's amendment and remarks the following objection/rejections are withdrawn.
  - a) Objection to claim 68, page 2, paragraph 3.
  - b) Rejection of claims 22-70, page 7, paragraph 5.
  - c) Rejection under 35 U.S.C. 102(b) or in the alternative 102(a) of claims 23-70, pages 8-9, paragraph 6.
  - d) Rejection under 35 U.S.C. 102(b) or in the alternative 102(a) of claims 23-70, pages 10-11, paragraph 7.

***Rejection Maintained***

4. The rejection of claims 40-48 under 35 U.S.C. 112, first paragraph is maintained for claims 23-70 for the reasons set forth on pages 3-6, paragraph 4 of the previous Office Action.

The rejection was on the grounds that the claims are directed to a method for treating a genetic disorder or condition or disease in a patient in need of treatment comprising administering an effective amount of a compound comprising a cholesterol group or derivative thereof having linked thereto a head group, wherein the head group is more positive than the head group of DC-Chol; further wherein the head group is a straight chain polyamine; further wherein two or more of the amine groups of the polyamine are separated by an ethylene group.

The claims broadly encompasses gene therapy, wherein the claimed method of treating a genetic disorder or condition or disease, is treated by administering a cationic lipid compound admixed with or associated with a nucleotide sequence.

The specification teaches that the compound of the invention is used in gene therapy, especially gene transfer (page 1). The specification teaches that one aspect of gene therapy involves the introduction of foreign nucleic acid into cells so that it is expressed protein may carry out a desired therapeutic function (page 1). The specification teaches that this type of therapy includes the insertion of TK, TSG or ILG gene to treat cancer, the insertion of the CFTR gene to treat cystic fibrosis, the insertion of the NGF, TH or LDL genes to treat neurodegenerative and cardiovascular disorders, the insertion of the IL-1 antagonist gene to treat rheumatoid arthritis, the insertion of the HIV antigens and the TK genes to treat AIDS and CMV infections, the insertion of antigens and cytokines to act as vaccines and the insertion of  $\beta$ -globin to treat haemoglobinopathic conditions such as thalassaemias (page 1). There are no working examples in the instant specification to guide the skilled artisan in practicing the claimed method.

The state of the art for gene therapy as discussed by Vile et al (*Gene Therapy*, Vol. 7, pp. 2-8, 2000) is unpredictable. Vile et al teach that the problems in which gene therapy for cancer will take into the next millennium focus far less on the choice of therapeutic gene(s) to be used than on the means of delivering them. Vile et al teach that there is already a battery of genes that we know are very effective in killing cells and if these genes can be expressed at the right site and at appropriate levels therapy may be occur (page 2). However, until the perfect vector is developed, the choice of gene will remain crucially important in order to compensate for the deficiencies of the vectors we currently have available (page 2, 1st paragraph, left column). Vile et al teach that whatever its mechanism, no single genes can be a serious contender unless it has

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a demonstrable bystander effect (page 2, right column) and the requirement for such a bystander effect stems directly from the poor delivery efficiency provided by current vectors (page 2, right column). Vile et al teach that a genuine ability to target delivery systems to tumor cells distributed widely throughout the body of a patient would simultaneously increase real titers and efficacy. Vile et al teach that in truth, no such systemically targeted vectors exist yet. Vile et al teach that injection of vectors into the bloodstream for the treatment of cancer requires not only that the vectors be targeted (to infect only tumor cells) but also that they be protected (from degradation, sequestration or immune attack) for long periods of time so that they can reach the appropriate sites for infection. Moreover, having reached such sites, the vectors must be able to penetrate into the tumor from the bloodstream before carrying out their targeted infection (page 4, bottom left column and top right column). In addition, Rochlitz C. F. (*Swiss Medicine Weekly*, 131:4-9, 2001) teaches that none of the more than one hundred clinical studies performed so far had formally proven efficacy of the approach (gene therapy) in any human disease. Rochlitz teaches that although anecdotal reports of tumor responses are becoming more frequent in several human malignancies, the situation has not changed dramatically." (see page 8, bottom of page). Rochlitz teaches that the main problems are still the lack of vectors with high transduction efficiency *in vivo*, the low tumor specificity of available systems, and our incomplete knowledge of molecular tumor pathology" (pages 8-9).

Thus, as taught above the state of the art regarding gene therapy is considered highly unpredictable. Furthermore, it would take one skilled in the art an undue amount of experimentation to determine what route of administration (e.g. intravenous, dermal, nasal, rectal, vaginal, inhalation, or topical administration) would result in a therapeutic response using a recombinant virus, lentivirus, adenovirus, retrovirus or bacterium comprising the nucleic acid encoding the antigen. The state of the art regarding the route of administration for gene therapy as exemplified by Verma et al, (*Nature*, Vol. 389, No. 6648, pages 239-242, 1997), indicates that factors including the nature of the diseases and/or disorders, the nature of a DNA and/or target tissue, and a delivery system and/or amounts of the DNA complexes employed in the delivery system that would generate a therapeutic effect *in vivo* must be considered for any gene therapy method to be successful (page 238, columns 1 and 2). Therefore, the skilled artisan at the time the invention was made recognized the lack of predictability of the nature of the art and state of the prior art to which the instant invention pertains. Also, such disclosures clearly indicate that the amount of direction or guidance presented in the specification is limited, and would not permit a person skilled in the art to use the invention without undue experimentation at the time the invention was made.

In view of the lack of predictability of the art to which the invention pertains, the lack of established clinical protocols for effective gene therapies, undue experimentation would be required to practice the claimed methods with a reasonable expectation of success, absent a specific and detailed description in applicant's specification of how to effectively practice the claimed methods and absent working examples providing evidence which is reasonably predictive that the claimed methods are effective for treating a genetic disorder, or condition or disease in a patient.

Applicant urges that the specification as filed includes an enabling disclosure of a method for treating a genetic disorder or condition or disease in a patient. Applicant refers to pages 18, 20-24 and Figure 25 of the instant specification to support their position. Applicant asserts that at page 19 of the instant specification teaches *in vitro* studies were performed with immortalized cystic fibrosis airway epithelial cells, followed by *in vivo* studies using BALB/c mice. Applicant urges that the specification provides working example that demonstrate that the methods are effective for treating a genetic disorder, condition or disease in a patient.

Applicant's arguments filed September 6, 2005 have been fully considered but they are not persuasive. It is the Examiner's position that the specification is not enabled for the claimed method.

To address Applicant's comments regarding page 19 and figures 24 and 25, it should be noted that the figure 24 relates to *in vitro* data as result of studies performed using cystic fibrosis epithelial cells. Figure 25 of the instant specification recites that the *in vivo* data was obtained by the intranasal instillation of cationic liposome/plasmid DNA complexes in to the lungs of female BALB/c mice. Thus, the instant specification teaches the delivery of cationic liposomes to the lungs of BALB/c mice. This assay determines gene delivery activity and not treatment of cystic fibrosis or any other genetic disorder, condition or disease (see page 16 of the instant specification). The instant specification does not include information on how the cationic liposomes were used to treat mice with cystic fibrosis or any other genetic disorder, condition or disease.

Therefore, the instant specification is not enabled for treating a genetic disorder, condition or disease in a patient. It is unclear that mice are an acceptable model for cystic fibrosis. It must be remembered that Applicant must be enabled for the claimed invention at the time of filing. It must also be remembered the lack of established clinical protocols for effective gene therapies, undue experimentation would be required to practice the claimed methods with a reasonable expectation of success, absent a specific and detailed description in applicant's specification of how to effectively practice the claimed methods. Thus, Applicant must provide evidence which is reasonably predictive that the claimed methods are effective for treating a genetic disorder, or condition or disease in a patient.

In view of all of the above, the rejection under 112, first paragraph is maintained.

5. **THIS ACTION IS MADE FINAL.** Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire **THREE MONTHS** from the mailing date of this action. In the event a first reply is filed within **TWO MONTHS** of the mailing date of this final action and the advisory action is not mailed until after the end of the **THREE-MONTH** shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than **SIX MONTHS** from the mailing date of this final action.

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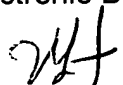
### **Conclusion**


6. Any inquiry of the general nature or relating to the status of this general application should be directed to the Group receptionist whose telephone number is (703) 308-0196.

Papers relating to this application may be submitted to Technology Center 1600, Group 1640 by facsimile transmission. The faxing of such papers must conform with the notice published in the Office Gazette, 1096 OG 30 (November 15, 1989). Should applicant wish to FAX a response, the current FAX number for the Group 1600 is (703) 872-9306.

Any inquiry concerning this communication from the examiner should be directed to Vanessa L. Ford, whose telephone number is (571) 272-0857. The examiner can normally be reached on Monday – Friday from 9:00 AM to 6:00 PM. If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Lynette Smith, can be reached at (571) 272-0864.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov/>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

  
Vanessa L. Ford  
Biotechnology Patent Examiner  
November 26, 2005

  
NITA MINNIFIELD  
PRIMARY EXAMINER  
11/28/05